

Level of evidence of verbal autopsy

Verbal autopsy determines probable causes of death when neither medical records nor formal medical attention are given. Usha Ram and colleagues (December, 2015)¹ extrapolated cause-specific mortality risks for men and women aged 15–69 years on the basis of deaths accessed by verbal autopsy during 2001–06 in India.¹ But many changes have occurred in the past decade. For example, the maternal mortality ratio for India in 1992 was 437 deaths per 100 000 livebirths; it decreased to 212 deaths per 100 000 livebirths during 2007–09, and it was expected to reach 135 deaths by 2015.^{2,3}

The Unique Identification Authority of India has an identification system card called Aadhaar, which is already linked to certain services such as cooking gas consumer data. This system needs to be linked to various health data and diseases (according to the International Classification of Diseases), and could also be extended to cause of death due to a particular disease.

Verbal autopsy has several limitations since many causes of death share similar symptoms (eg, dyspnoea or fever). The causes of death assessed by verbal autopsy only represent a small sample of the list of causes used on medical certificates. In the scenario of deaths due to “other and unknown” causes, the physician giving the verbal autopsy is likely to choose a cause among the causes already assessed, which can cause a bias. Lastly the usefulness of verbal autopsies depends on quality and standardisation. Quality depends on sensitivity and specificity of each diagnosis, and quality assurance is the main hurdle to overcome before we accept death reports based on verbal autopsies.⁴

In the ages of evidence-based medicine, we must know the level of evidence of verbal autopsy.

I declare no competing interests.

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- 1 Ram U, Jha P, Gerland P, et al. Age-specific and sex-specific adult mortality risk in India in 2014: analysis of 0.27 million nationally surveyed deaths and demographic estimates from 597 districts. *Lancet Glob Health* 2015; **3**: e767–75.
- 2 Chatterjee A, Paily VP. Achieving Millennium Development Goals 4 and 5 in India. *BJOG* 2011; **118** (suppl 2): 47–59.
- 3 Maternal Mortality Ratio India 2007–09. <https://data.gov.in/catalog/maternal-mortality-ratio-india> (accessed Nov 20, 2015).
- 4 WHO. Limits to the use of verbal autopsies. *Bull World Health Organ* 2006; **84**: 164.

